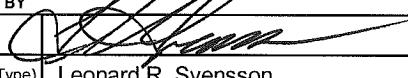


Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i>		Complete if Known	
		Application Number	10/788,974-Conf. #5458
FEE TRANSMITTAL For FY 2008		Filing Date	February 26, 2004
		First Named Inventor	Kent JORGENSEN
		Examiner Name	G. S. Kishore
		Art Unit	1612
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT	(\$) 1,100.00	Attorney Docket No.	2081-0125P

METHOD OF PAYMENT (check all that apply)			
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 02-2448	Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)			
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments		

FEE CALCULATION						
1. BASIC FILING, SEARCH, AND EXAMINATION FEES						
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity
Utility	310	155	510	255	210	105
Design	210	105	100	50	130	65
Plant	210	105	310	155	160	80
Reissue	310	155	510	255	620	310
Provisional	210	105	0	0	0	0
2. EXCESS CLAIM FEES						
Fee Description	Small Entity					
Each claim over 20 (including Reissues)	50 25					
Each independent claim over 3 (including Reissues)	210 105					
Multiple dependent claims	370 185					
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
77	- 76 = 1	x 50.00	= 50.00	Fee (\$)	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
4	- 4 = 0	x 210.00	= 0.00			
HP = highest number of independent claims paid for, if greater than 3.						
3. APPLICATION SIZE FEE						
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)	
		- 100 = /50 = (round up to a whole number) x			=	
4. OTHER FEE(S)						
Non-English Specification, \$130 fee (no small entity discount)						
Other (e.g., late filing surcharge): 1253 Extension for response within third month 1,050.00						

SUBMITTED BY	
Signature	
Name (Print/Type)	Leonard R. Svensson
Registration No. (Attorney/Agent)	30,330
Telephone	(858) 792-8855
Date	September 19, 2008